

# In the Court of Appeals of the State of Alaska

**Sherrie Ina Wilson,**  
Appellant,

v.

**State of Alaska,**  
Appellee.

Court of Appeals No. **A-13318**

## **Notice of Intent to Enter Judgment For Cost of Appointed Attorney**

Date of Notice: **4/13/22**

Trial Court Case No. **3AN-11-08618CI**

Unless you or the prosecutor objects by **5/31/22** (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your appointed attorney as indicated below:

Type of Appellate Proceeding	Misdemeanor	Felony
Merit Appeal or Appeal from Post-Conviction Relief Proceedings	750	<b>\$1,500</b>

Entered under Appellate Rule 209(b)(6).

Clerk of the Appellate Courts



Kaitlin D'Eimon, Deputy Clerk

cc: Sherrie Ina Wilson at Hiland Mountain Correctional Center  
Distribution:

Email:  
McFarland, Renee, Public Defender  
Soderstrom, Donald

# In the Court of Appeals of the State of Alaska

**Sherrie Ina Wilson,**

Appellant,

v.

**State of Alaska,**

Appellee.

Court of Appeals No. **A-13318**

## **Opposition to Entry of Judgment For Cost of Appointed Attorney**

Date of Notice: **4/13/22**

Trial Court Case No. 3AN-11-08618CI

I oppose the entry of the proposed judgment against me for the cost of appointed attorney for the following reason(s):

- ☐ My conviction was reversed on appeal.
- ☐ I filed the following type of action, but the clerk or court assessed the wrong amount for this action:
  - ☐ Sentence Appeal
    - ☐ Combined Merit Appeal and Petition for Sentence Review
    - ☐ Petition for Sentence Review
    - ☐ Petition for Hearing
    - ☐ Merit Appeal
    - ☐ Petition for Review
    - ☐ Appeal from Post-Conviction Relief Proceeding
    - ☐ Original Application
    - ☐ Combined Merit and Sentence Appeal
- ☐ The clerk or court is proposing to enter more than one judgment against me. This is not correct because all of my offenses were resolved in one court proceeding.
- ☐ I should be assessed less than the scheduled amount because my attorney spent only \_\_\_\_ hours on my case. (If you check this box, you must attach a statement from your attorney showing the hours spent on your case.)
- ☐ Other \_\_\_\_\_

Appellant/Petitioner's Daytime Phone

Appellant/Petitioner's Signature

Appellant/Petitioner's Mailing Address

City

State

Zip

Mailed to State's Attorney on: \_\_\_\_\_ (Date)